	Year To Date Earnings					Year To Date Deductions			
010-004284-w2-33547-CGA		Retro Vacati Cost o Benefi	Regular - Semi Mo. Retro Pay Vacation Paid Not Taken Cost of Wage Allowance Benefit Differential Flat Group Term Life > \$50000		78767.5 109.6 4499.8 8904.3 288.0 27.6	5 Vision Plan 3 Pretax Dental 4 Group Term L 0	Pretax Medical Deduction Vision Plan Pretax Dental Plan Group Term Life>\$50000 Offset		
Social Security No.: 095-33-8897 Marital Status: Married Exemptions/Allowances: Federal: 3/0 State: 0/0									
a Employee's social security number				7 Social security tips		tips, other compensation	2 Federal income tax withheld		
095–33–8897 c Employer's name, address, and Z	008705 WY/2S7	8 Allocated tips		88887.75 3 Social security wages		9726.54 4 Social security tax withheld			
			o Allocateu tij	5	5 500iai 50	88887.75	5511.04		
Capgemini America, Inc. PO Box 17004 Augusta, GA 30903			9 Verification code		5 Medicare wages and tips		6 Medicare tax withheld		
					88887.75		1288.87		
b Employer identification number (^{EIN)} 22-2575929		10 Dependen	t care benefits	୍ଦି 12a See i ଟ୍ରି C	nstructions for box 12 27.68	C12b DD 1206	52.50	
e Employee's first name and initial HIREN N SOLANKI 5933 CALDERA RIDGE LITHIA, FL 33547 f Employee's address and ZIP code		Suff.		ed plans Retirement Third-party plan sick pay	C 12c d 14 Other		G 12d		
15 State Employer's State ID No 1		17 State incom	e tax	18 Local wages, ti	ps, etc.	19 Local income tax	20 Locality name		
2017 OMB No. 1545-0008 Form W-2 Wage and Tax Statement			Employe Copy	Yee'S Copy C - For EMPLOYEE'S RECORDS. (See Notice to Employee on back.) Department of the Treasury-Internal Revenue Service. This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalt or other sanction may be imposed on you if this income is taxable and you fail to report it.					
2017 OMB No. 1545-0008 Form W-2		ement	State Filing Co	Department	t of the Trea	sury-Internal Revenue Se			
a Employee's social security numb 095-33-8897	er d Control number 008705 WY/2S7		7 Social security tips		1 Wages, tips, other compensation 88887.75		n 2 Federal income tax withheld 9726.54		
c Employer's name, address, and 2			8 Allocated ti	ns	3 Social se	ecurity wages	4 Social security tax with		
Capgemini America, In			o Anocated II	μs	3 JULIAI SE	88887.75	,	11.04	
PO Box 17004	· ·		9 Verification	code	5 Medicare	e wages and tips	6 Medicare tax withheld		
Augusta, GA 30903						88887.75		38.87	

Augusta, GA 30903					88887.75		1288.87	
b Employer identification number (EIN) 22-2575929	10 Dependent care benefits		C 12a See instructions for box 12		° 12b ª DD	12062.50		
e Employee's first name and initial Last name HIREN N SOLANKI	Suff.	11 Nonqualified plans		ୁ 12c ଜୁ		ି 12d ଜୁ		
5933 CALDERA RIDGE DRIVE LITHIA, FL 33547			Retirement Third-party plan sick pay	14 Other				
f Employee's address and ZIP code								
5 State Employer's State ID No 16 State wages, tips, etc. 17 State inc		me tax 18 Local wages, tip		os, etc. 19 Local income tax		20 Locality name		
2017		Federal	Сору В - То) Be Filed \	Nith Employee's FEDERA	AL Tax Re	turn.	

ZU1			Federal	Copy B - Tr	Bo Filod	With Employee's EEDERA	1 Tay Rot	urp	
OMB No. 1545-0008 Form W-2	nent	Filing Copy B - To Be Filed With Employee's FEDERAL Tax Return. Department of the Treasury-Internal Revenue Service.							
a Employee's social security number d Control number		7 Social security tips		1 Wages, tips, other compensation 2 Federal income tax withher					
095-33-8897	008705 WY/2S7					88887.75		9726.54	
c Employer's name, address, and ZIP code			8 Allocated tips		3 Social security wages		4 Social security tax withheld		
Capgemini America, Inc.					88887.75			5511.04	
PO Box 17004			9 Verification code		5 Medicare wages and tips 88887.75		6 Medicare tax withheld		
Augusta, GA 30903							-	1288.87	
b Employer identification number (EIN) 22–2575929			10 Dependent care benefits		C12a See	instructions for box 12 27.68	C 12b	12062.50	
e Employee's first name and initial HIREN N SOLANKI	Last name	Suff.	11 Nonqualifie	ed plans	C d d	1	C 12d		
5933 CALDERA RIDGE DRIVE LITHIA, FL 33547			13 Statutory Retirement Third-party		14 Other				
			employee	plan sick pay					
f Employee's address and ZIP code									
15 State Employer's State ID No 16	State wages, tips, etc.	17 State income	tax	18 Local wages, tip	os, etc.	tc. 19 Local income tax		20 Locality name	

Notice to Employee

by you have to file? Refer to the Form 1040 Instructions to determine if you are required to file a tax return. Even you do not have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for

If you do not have to file a tax return, you may be eligible for a retund if box 2 shows an amount or it you are eligible tor any credit. Earned income credit (EIC). You may be eligible for a retund if box 2 shows an amount or it you are eligible tor any credit. Earned income credit (EIC). You may be able to take the EIC for 2017 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You want is based on income and family size. Workers without children is earned for services provided while you were an inmate at a penal institution. For 2017 income limits a more than your tax liability is refunded to you, but only if you file a tax return. Clergy and religious workers. If you are not subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers. Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and sak your employer to correct your employer to EsSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form V-2. If you are not subject for social security and base and Tax Statement, with the your lax return. If you mane and SSN are correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form V-2. Be sure to day any employer for all corrections more to any one social security and prove that are the same as shown on your social security and the security of the report any name, SSN, or money and SSN to correct any name, SSN, or money and SSN or more your employer for all corrections are to get your copies of Form W-2. Be wore to that are not the same as shown on your social security card, you show with you fax return. If you tare and tay that are to that are not the same as shown

may visit the SSA at www.socialsecurity.gov. Cost of employer-sponsored health coverage (if such cost is provided by the employer). The

reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD is not taxable. Credit for excess taxes. If you had more than one employer in 2017 and more than \$7,886.40 in social security and/or Tier 1 railcoad retirement (RRTA) taxes were withheid, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railcoad employer and more than \$4,630.50 in Tier 2 RRTA tax was withheid, you also may be able to claim a credit. See your Form 1040 or Form 1040A instructions and Pub. 505, Tax Withhoding and Estimated Tax.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return. Box 2. Enter this amount on the federal income tax withheld line of your tax return. Box 5. You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Form 1040 instructions to determine if you are required to complete Form 8959. Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare wages and tips shown in Box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above \$200,000. Box 6. This amount in clucked in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see

Note: The U-Y-X-Multitude Medicate Fax on the Origination of the Wages and tube above 2000000. Box 8. This amount is not included in boxes 1, 3, 5, or 7. For information on how to report tips on your tax return, see your Form 1040 instructions. You must the Form 4137, Social Security and Medicare Tax on Unreported Tip Income, with your income tax return to report at least the allocated tip amount unless you can prove that you received a smaller amount. If you have records that show the actual amount of tips your cereived, report that amount even if it is more or less than the allocated tips. On Form 4137, your social security and Medicare tax owed on the allocated tips. On Form 4137, your social security is will be credited to your social security record (used to figure your benefits). By Call security tips will be credited to your social security record (used to figure your benefits). Ho Form 4137, your social security and Medicare tax owed on the allocated tips. On Form 4137, your social security this will be credited to your social security record (used to figure your benefits). By Call security tips will be credited to your social security record (used to figure your benefits). Ho FOS In Jouet and the social security and Medicare tax owed on the allocated tips. Do Form 4127, your social security this will be credited to your social security record (used to figure your benefits). By Call security tips will be credited to your social security record (used to figure your benefits). By FOS In Units amount includes the total dependent care tem. The code is not entered by your softward or your softward Calleting filling form All and the social security and medicare tax is and the social social and not entered on incurred on your benefit (including amounts) included in the All of the temestity incomme and nonalitated and not 1. Compensation or nongovernmental section 457(b) plan or (b) included in box 3 and/or 5 if it is a prior year deferral compensation or nongovernmental section 457(b) plan o

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year

Uncollected social security or RRTA tax on tips. Include this tax on Form 1040. See "Other Taxes" in the Form Uncollected Medicare tax on tips. Include this tax on Form 1040. See "Other Taxes" in the Form 1040

instructions.

Instructions. C=Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to social security wage base), and 5). D=Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement. Elective deferrals under a section 403(b) salary reduction agreement Elective deferrals under a section 408(k)(d) salary reduction SEP C=Elective deferrals under a section 408(k)(d) salary reduction SEP C=Elective deferrals under a section 408(k)(d) salary reduction SEP C=Elective deferrals under as account 408(k)(d) salary reduction SEP C=Elective deferrals under as section 408(k)(d) salary reduction SEP (salar) (

G—Elective deferrals and employer contributions (including nonelective deterrals) to a section 437 (u) verence compensation plan H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See "Adjusted Gross Income" in the Form 1040 instructions for how to deduct. J—Nontaxable sick pay (information only, not included in boxes 1, 3, or 5) M—Uncollected Neclar each and that an ot taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions. U—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions. U—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions. D—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions paid directly to employee (not included in hoxes 1, 3, or 5) O—Nontaxable combat pay. See the instructions for Form 1040 or Form 1040A for details on reporting this amount.

Control a value control pays, occurs instructions and a mount.
 Amount.
 R—Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care
 Insurance Contracts.
 Insurance C

Insura S T

Insurance Contracts. Sememployee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1) Tendoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts. W—Employee contributions (included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts. W—Employee contributions (included in box 1). Complete Form 8839, Qualified Adoption Expenses, to compute any taxable and nontaxable amounts. W—Employee contributions (including and wonts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAS). Y—Deferrats under a section 409A nonqualified deferred compensation plan Z—income under a nonqualified deferred compensation plan Tuctuder in box 1. It is subject to an additional 20% tax plus interest. See "Other Taxes" in the Form 1040 instructions. BB—Designeted Roth contributions under a section 401(k) plan BB—Designeted Roth contributions under a section 403(b) plan DD—Cost of employer-sponsored health coverage. The amount reported with Code DD is not taxable. EE—Designated Roth contributions under a section 457(b) plan. This amount does not apply to contributions under a tax-extend transition section 457(b) plan.

Emperimental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

FF-Permitted benefits under a qualified small employer health reimbursement arrangement

Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement Arrangements (IRAs). Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation. Tier 1 tax, Their 2 tax, Medicare tax and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

should file Form SSA-131, Employer Keport of Special wage Paymetics, with the social security Autimitiation and provide a copy. Box 12: The following list explains the codes shown in box 12. You may need this information to complete your tax plans are generally limited to a total of \$18,000 (\$12,500 if you only have SIMPLE plans; \$21,000 for section 403(b) and Form SSA. (Ba, and Form Water and Form SSA. (States are special water code H are limited to \$18,000 (\$12,500 if you only have sIMPLE plans; \$21,000 for section 403(b) (\$19,000 for section 403(b) SIMPLE plans; \$10,000 for section 403(b) SIMPLE plans; \$10,000 for section 403(b) (\$10,000 for section 403(b) SIMPLE plans; \$10,000 for section 403(b) (\$11,000 for section 403(b) SIMPLE plans; \$11,000 for section 403(b) SIMPLE plans; \$11,000 for section 403(b) (\$12,500 if you only have silwel as deferral on the tos \$10,000. (\$32,000 for section 403(b) SIMPLE plans; \$11,000 for section 403(b) (\$12,500 if you only have silwel as deferral on the social security benefits, keep Copy C of Form W-2 for at least 3 years after the due date for filing your income tax returm. However, to help **protect your social security benefits**, keep Copy C until you begin receiving social security benefits, list in case there is a question about your work record and/or earnings in a particular year. However, to help **protect your social security benefits**, list in case there is a question about your work record and/or earnings in a particular year. However, to help **protect your social security benefits**, list in case there is a question about your work record and/or earnings in a particular year. However, to help **protect your your your work record and/or earnings in a particular year**. (States are specified to the overall elective deferrals in must be included in income. See the "Wages, Salaries, Tips, etc." line instructions for Form 1040. If **PREDED**, **PLEASE MAKE A COPY OF YOUR STATE OR FEDERAL FILING COPY FOR USE WITH YOUR CITY OR LOCAL TAX FILING**